

ARIZONA SUPREME COURT

ADMINISTRATIVE OFFICE OF THE COURTS



LA PAZ COUNTY ADULT PROBATION

Operational
Review

Final Report

October 2017

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Kathy Waters, Director
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**La Paz County Probation Department
Operational Review Final Report – October 2017**

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EXECUTIVE SUMMARY

Overview

Arizona's adult probation system is decentralized, with each of the 15 local probation departments reporting directly to the presiding judge of the superior court or court administrator in their respective county. In accordance with the administrative and supervisory authority established under Article VI, Section 3 of the Arizona Constitution and in cooperation with the local probation departments, the AOC has developed and implemented a comprehensive operational review process.

Objective

The APSD's operational review team conducts reviews in accordance with the Arizona Judicial Department's *Advancing Justice Together: Courts and Communities* strategic agenda. Operational reviews assess and document adult probation department's operational and program performance to assist in building effective community supervision practices. The objective of the review team is to ensure accountability and compliance with Arizona Revised Statutes (A.R.S.), the Arizona Code of Judicial Administration (ACJA), Administrative Orders (AO), Administrative Directives (AD), Arizona Rules of Court, approved program plans, funding agreements, and local policies and procedures. The review is designed to identify areas of non-compliance and make recommendations for corrective action, while promoting an atmosphere of collaboration and facilitation of technical assistance. To this end, the review team inspects the department's policy manual and response to the SAQ, reviews case files, program files and all correspondence and reports submitted to the APSD. The review team also conducts interviews with appropriate staff working with Minimum Accounting Standards (MAS) and Firearms/Ammunition and Defensive Tactics.

The on-site portion of the La Paz County Adult Probation Department operational review was conducted January 30 through February 1, 2017. The preliminary work began in December 2016. The review team consisted of Carol Banegas-Stankus, DeAnna Faltz, Jayne Price, and Joshua Welker. After the final report is published, a follow-up report will be issued if there are any outstanding compliance issues. The Lead Operational Specialist will work collaboratively with the department to develop a corrective action plan to resolve all outstanding compliance issues of less than 90 percent in the final report.

Overall Conclusion

Number of Standards Exceeded:	0
Number of Standards Met:	10
Number of Standards Not Met:	27
Number of Standards Not Applicable:	2

ACCOMPLISHMENTS

La Paz County Adult Probation Department reported the following as their 2016 accomplishments:

- January 2016, Veterans Court was implemented in La Paz County. Veterans Court is a regional court that only handles eligible misdemeanor offenses. The Probation Department had a significant role in developing and implementing the program. The majority of veterans in the program are placed on supervised probation with our Department.
- February 2016 La Paz County Adult Probation hosted the Arizona Chief Probation Officer's Association meeting which was a success. The Chiefs also enjoyed the dinner river cruise that was offered.
- May 1, 2016 the department implemented pre-trial services in four courts throughout the county. This was completed with collaboration from the Arnold Foundation and the La Paz County Sheriff's Department. By October 1, 2016 all defendants arrested on new offenses in La Paz County (over 100 cases/month) were being screened using the PSA.
- May 31, 2016 the Chief Probation Officer position was filled by the promotion of a current probation officer within the department.
- Department restructuring:
 - A Deputy Chief Probation Officer position was created and two vacant Division Supervisor positions were eliminated.
 - With approval from AOC and the County Board of Supervisors, the Department created a pre-trial officer/transport officer position which was filled in June 2016 by promoting a support staff member.
 - A vacant probation officer position was filled in July 2016.
 - Two probation officers were trained to be DT instructors and two probation officers were trained to be FT instructors during the second half of 2016. The Department had no DT/FT instructors prior to these trainings.
- The Chief Probation Officer, Deputy Chief Probation Officer, and the two newest probation officers attended the annual awards luncheon in September 2016.
- September 2016, in collaboration with the La Paz County Sheriff's Department and AOC, the Department hosted a Sex Trafficking 101 for community leaders and agencies.
- The Department is working on an IGA with Mohave County to have an alternative detention center for juveniles, specifically 13-501 cases. The Department is currently seeking bids for a drug testing contract. Currently the Department uses TASC via a MOU.
- Department policies and procedures are being reviewed for updating.
- Security has been a significant focus statewide. Handheld radios compatible with the LPSCO dispatch center were purchased in order to increase officer safety when out in the field. Procedures on entering and exiting the probation building have been revised to increase officer safety.

"The La Paz County Probation Department continues to move forward despite trying times. 2016 has given the Department many opportunities to learn, adapt, and thrive and it is believed that the Department has done just that. The management team looks forward to the operational review as it is another opportunity to learn and grow so that the Adult Probation Department can continue to improve."

ADMINISTRATION AND MANAGEMENT

Each probation department fulfills a variety of general administrative and management functions which directly affect the department's performance and effectiveness in its supervision of probationers. Many of these functions are accomplished in accordance with Statutes, the ACJA, AOs, ADs, funding agreements, and local policies and procedures. The review team assessed the department's compliance with administrative and management functions in the following areas: departmental policies and procedures, officer certification, education and training requirements for department staff, general reporting obligations, MAS, supervisory case file review, and pre-sentence investigation (PSI) reporting.

Policies and Procedures

Pursuant to [ACJA § 6-105\(D\)\(2\)\(b\)](#)

Findings:
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
<input type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
<input checked="" type="checkbox"/> Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
<input type="checkbox"/> Standard Not Applicable

AOC staff reviewed policies from the department's policy and procedure manual, many policies have not been revised since 2007. The following policies require revisions as described below.

ADMINISTRATION AND MANAGEMENT	
Policy and Title	Recommended Revisions
A-1 Personnel Practices	Incorporate the verification of current and past employment and checking professional and personal references as required under ACJA § 6-106(H)(3)(b-c).
A-2 Training Requirements	Incorporate ACJA § 6-104(G)(1)(a-b) requirement into policy. Section 9.d. revise the wording "the first twelve months of employment" to code requirement "one year of the date of hire" as the current language extends beyond the one year of the date of hire. Section 9.f. revise the wording "twelve months" to code requirement "one year" as the current language extends beyond the one year of assignment.
A-31 Firearm Authorization	Page 1 is mistitled "Use of Force Policy" revise title to read "Firearm Authorization."

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	Authorization to Carry form should be incorporated into this policy and revised to meet ACJA § 6-113(E) which is a two-part process; officer's written request and COP's confirmation of requirements. ACJA § 6-113(G)(3) is the third part of the authorization process.
A-29, A-31, S-36, and S-37	It is recommended that the department review these policies as they contain duplicated and/or conflicting information and paraphrase current and/or outdated statute/code. Please review all listed policies and recommended revisions and forward all new and revised policies.
A-15 Collections/Finance Financial Receipting and Accounting Procedures	It is recommended that the department revise this policy as it contains conflicting and outdated information. The authority referenced, AO 94-68 has been replaced by AO 97-62. It is also recommended that the department reference ACJA § 1-401 as the authority for the revised policy.
I-3 Presentence Investigation/ Report	Incorporate Arizona Rules of Criminal Procedure 26.4(B) as an authority for this policy.
I-8 Reporting Alien Convictions	Quote Administrative Directive 2009-13, affecting 2007-05. AOC Foreign Born Protocols should be referenced.
A-6 Use of Department Vehicles	It is recommended that the department revise this policy to reflect ACJA § 6-111 requirements as the current policy states incorrect code requirements for purpose, authorization, usage, accidents, maintenance, and fuel.

COMMUNITY PROTECTION

S-2 Assess, Case Plans, Standards Of Probation Supervision	<p>III. Standard Supervision.</p> <p>Section (A) High Risk (1) revise "and/or" to read "and."</p> <p>Section (B) Medium Risk (1) revise "or" to read "and."</p> <p>Section (C) Low Risk (1) It is recommended that the current language "For those low risk offenders that possess a criminogenic need" be removed as it does not meet the code requirement.</p> <p>Section (C)(3) Revise language as it conflicts with current code.</p> <p>Section (D) Waiver of Minimum Supervision Requirements. The referenced code should be ACJA § 6-201.01 (K)(9)(a-c).</p> <p>IV. Standards of Intensive Supervision.</p> <p>It is recommended that the department revise this section to incorporate ACJA § 6-202.01 (N)(3)(b) language and requirements. Specifically (A)(6), (B)(6), (C)(6), and (E)(6). Section (B)(8) is a higher standard than required by code and the department should ensure that this higher standard is attainable. Section (C)(8) is a higher standard than required by code and the department should ensure that this higher standard is attainable. Also, the last sentence appears to be out of place.</p> <p>Section (D) is incomplete.</p>
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	<p>Section (E)(8) is a higher standard than required by code and the department should ensure that this higher standard is attainable. There are two sections (E), the last one should be (F).</p>
S-3 Global Position System S-32 GPS Global Position System	<p>It is recommended that both policies be revised using the appropriate statute, A.R.S. § 13-902, and appropriate administrative directive, AD 2011-41. Policies contain many grammar errors and outdated language.</p>
S-11 Petition to Revoke	<p>Section B remove "...complete new Risk Needs Assessment (OST)" as this is not necessary. Section F remove "PIMS" as it is now APETS. It is recommended to add ACJA §§ 6-201.01 and 6-202.01 to the authority section. It is also recommended to add a section to note whether or not an opted-in victim has been notified on the Petition to Revoke template.</p>
S-19 UA/Substance Testing	<p>Update policy to be in accordance with ACJA § 6-110, this code should also be referenced in the authority section. Submit revised policy for review.</p>
S-24 Intrastate Transfers	<p>The authority for this policy must reference ACJS § 6-211. During the 2012 Op Review, AOC requested that this policy be updated as it contains outdated and inaccurate language. Submit revised policy for review.</p>
S-25 Interstate Cases	<p>This policy has not been revised since 2010 and does not reference ICAOS Rules. ICAOS Rules should be mentioned as an authority. This policy should be updated with current language for both Incoming and Outgoing Interstate Compact Cases. Submit revised policy for review.</p>
A-32 Use of Force	<p>Section A. d. ii. Remove "groin area" as it is not an accurate phrase according to curriculum.</p>
A-31 Firearm Authorization	<p>Policy is incorrectly titled "Use of Force Policy."</p>
S-36 Officer Safety Training	<p>II Section D. Waiver Requirements is outdated language as code no longer contains the waiver option. Section G. 3.a. The time frame of "40 hour" academy has been removed in a previous code revision. III Section A. This use of force section is not appropriate for this policy. It should not discuss "minimal level of force" as this is not required in ARS or case law. It should remove level and continuum language as that is no longer part of the Use of Force Code. It should use the term "serious bodily injury" instead of "great bodily harm."</p>

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S-37 Firearms	<p>Section B. 4. Reword “AOC waiver” to read “documented AOC approval.”</p> <p>Section E. Replace with the following recommended language. “Firearms may only be discharged in defense of the officer or a third person when the imminent threat of death or serious bodily injury exists.”</p> <p>Section G. “...Firearms will be kept within the Probation Department Officers...” Please revise the word Officers to Office. Also, define the exception that allows an off-duty officer to take a firearm out of the Probation Department Office.</p> <p>Section Discharges and Critical Incidents</p> <p>Section A-F. Please revise to be in accordance with ACJA § 6 112 (F-G).</p> <p>Section H. 5. Conflicting statement, is the officer placed on admin. leave and directed to counseling automatically or not?</p> <p>Section H. 7. In accordance with code a Review Committee must be appointed within 20 days rather than “convened.” ACJA § 6-112 (G)(2).</p> <p>Training Section A. “Firearms training shall be conducted at least twice annually” is outdated language as the Committee on Probation recommends that on-going firearms training be held quarterly.</p>
S-36 Officer Safety Training	<p>It is recommended to add ACJA §§ 6-112 and 6-113 to the authority section of the policy.</p> <p>Sections I. D., E. and II A., and Sections E. through G. are not in accordance with ACJA § 6-107 H. and I.</p> <p>Section III A. 3 through 4 are not in accordance with ARS § 6-112 (E) and the departments A-29 policy verbiage. Please update this section to reflect current use of force language. It is also recommended that the policy refer the reader to the departments A-29 Use of Force policy.</p> <p>Section III. C. 2 “all incident reports...whenever possible” please revise to be in accordance with code to state “review within two business days of receipt.”</p> <p>Section III. D. 2. Conflicts with information in the departments S-37 policy. Please review both policies for consistency and determine if both policies are necessary and if the department wants a higher standard than code (S-37 is the higher standard).</p>
S-42 Case Supervision Strategies	<p>It is recommended that policy be updated in accordance with current evidence based research as provided by the National Institute of Corrections https://nicic.gov/contact/.</p>
S-44 Principles of Evidence Based Supervision	<p>It is recommended that policy be updated in accordance with current evidence based research as provided by the National Institute of Corrections https://nicic.gov/contact/.</p>

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TREATMENT SERVICES

Drug Treatment Education Fund (DTEF) The department submitted a revised DTEF policy but additional corrections are required as follows:
1st policy paragraph: “on behalf of the Legislator” should read “on behalf of the Supreme Court.”
Remove the language “AOC policy and directives.”
(2)(g) Remove the language “When applicable” as this is not code language and add title XXI to this section.

Department Response: During the pre-draft phase the department submitted a revised S-27 DNA policy, S-28 Absconder/Warrant policy and S-7 Sex Offender Guidelines. Each were reviewed and in compliance with code and statute requirements. “The Department recognized, prior to the operational review that many policies were outdated. Since the Op Review, the Department has started to update and revise the identified policies. These updated policies will be submitted to the Op Review team as they are completed for review so that changes can be made, where necessary.”

Required Action: Along with the referenced policies stated above, the Department has also submitted revised policies A-31 Firearm Authorization and A-32 Use of Force, both in compliance with code and statute. It is recommended that the department continue review of all policies and procedures to ensure that the appropriate authority is stated and that language is consistent with code and statute. Forward to AOC for review.

Recommendation: None

Employment

Pursuant to [ACJA § 6-106\(H\)\(3\)\(b-c\)](#) , [ACJA § 6-106\(F\)\(3\)\(a\)](#) , and [ACJA § 6-106\(H\)\(1 through 8\)](#)

Findings:

- | |
|---|
| <p><input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard: (101% and above)</p> <p><input type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))</p> <p><input checked="" type="checkbox"/> Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below</p> <p><input type="checkbox"/> Standard Not Applicable</p> |
|---|

Four personnel files were selected for review. Two of the four probation/surveillance officers hired on or after August 2012 were selected for review. Two of the files reviewed were officers hired prior to August 2012 and were reviewed only for annual requirements and the results are below:

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Employment Qualification Review				
Requirement	# of Files in Compliance	% Compliant	No	N/A
Application for Employment Completed	2	100%	0	2
Verification of Bachelor's Degree (High School Diploma/GED-for SO)	2	100%	0	2
National and State Criminal History Check before hire	2	100%	0	2
Arizona & Other States of Residence MVD Check	2	100%	0	2
Employer Reference Checks	0	0%	2	2
Professional Reference Checks	2	100%	0	2
Personal Reference Checks	1	50%	1	2

Department Response: “The Department has created a new hire check list to ensure compliance with code requirements. Policy will be updated to reflect use of the checklist and sign off by the Chief Probation Officer (CPO) to ensure compliance at each stage.”

Required Action: Provide a copy of the Department’s revised policy that reflects use of the above stated checklist and sign-off by the CPO.

Recommendation: None

Officer Certification/COJET/Training

Pursuant to [ACJA § 6-106 \(J\)\(1\)\(b\)](#) , [ACJA § 6-104 \(F\)\(1\)](#) adopted via [AO 2006-99](#) , [ACJA § 6-104 \(G\)\(1\)\(a\)](#), [ACJA § 1-302 \(K\)](#), and [ACJA § 6-107 \(E\)](#) .

Although ACJA does not specify a time frame for OST/FROST refresher training, when departments transitioned to Evidenced Based Practices the formal training provided a recommendation that refresher training should be completed every three years, per validation studies conducted by the University of Cincinnati Corrections Institute (UCCI).

Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The results for the four files reviewed are listed below.

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Officer Certification/OST FROST Refresher Training					
Requirement	# of Files in Compliance	% Compliant	No	NA	Total
Certification officer received training on & will adhere to Code of Conduct for Judicial Employees, etc.	2	100%	0	2	4
8 hours of officer safety training within 30 days of hire	0	0%	1	3	4
Completion of PO Certification Academy within one year of the date of hire/date in position	1	100%	0	3	4
Certification requested by CPO after one year of service has been completed from hire date/date in position	0	NA	0	4	4
Completion of IPS Academy within one year of hire date	1	100%	0	3	4
OST/FROST refresher training every 3 years	0	NA	2	2	4

EBP effective dates: October 28, 2009 (SPS) and December 17, 2010 (IPS)

Department Response: “The Department is in the process of creating a training checklist with new hire and ongoing training requirements to ensure compliance with code requirements. Policy will be updated to reflect use of the checklist. Both will be submitted upon completion.”

Required Action: Provide copy of newly created training checklist along with a revised policy which will reference the use of the training checklist.

Recommendation: None

Continuing Employment

Pursuant to [ACJA § 6-106 \(J\)\(1\)\(f\)](#), [ACJA § 1-302](#), and [ACJA § 6-107\(h\)\(7\)\(a\) & \(b\)](#)

Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The results for the four files reviewed are listed below.

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Biannual Criminal History & MVD Check				
Requirement	# of Files in Compliance	# of Files Not In Compliance	%Compliant	NA
Criminal History Check Every 2 Years	0	2	0%	2
MVD Check Every 2 Years	0	2	0%	2

Continuing Education					
Requirement	# of Files in Compliance	% Compliant	No	NA	Total
2015/2016 Annual Continuing Education Requirement	3	100%	0	1	4

Department Response: “The Department has added the criminal history and MVD check biannual requirement to the personnel checklist. Department policy will be updated if needed. Please see attached Personnel checklist.”

Required Action: Provide a copy of the Department’s revised policy.

Recommendation: None

Pursuant to [ACJA § 1-302\(K\)\(6\)](#)

The CPO, Tyson Ross, was appointed to this position in May 2016. At the time of the La Paz County Operational Review, Mr. Ross had been in the position for nine months. According to code, the CPO shall attend at least one national training event every three years.

Department Response: Not applicable

Required Action: None

Recommendation: Not applicable

Firearms Standards

Pursuant to [ACJA § 6-113](#)

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Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☐ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Of the four officer files reviewed, all of them are armed officers. Note: three of the four armed officer's files were reviewed for annual training (area #13). Below are the findings of the review of personnel files:

Firearms Standards	Yes	No	TOTAL	NA	% Compliance
ACJA § 6-113(E)(1); Officer written request to carry to CPO	2	0	2	2	100%
ACJA § 6-113(E)(4); CPO acts on officer initial request to carry within 30 days	2	0	2	2	100%
ACJA § 6-113(E)(g)(1-7); Officer signs form attesting to 7 Items	2	0	2	2	100%
ACJA § 6-113(E)(2)(a); Officer completed psychological testing	1	0	1	3	100%
ACJA § 6-113(E)(2)(b); Criminal history records check completed	2	0	2	2	100%
ACJA § 6-113(E)(2)(c); Officer completed defensive tactics training	2	0	2	2	100%
ACJA § 6-113(E)(2)(d); Officer signed form indicating medically/physically able to perform armed officer duties	2	0	2	2	100%
ACJA § 6-113(E)(2)(e); Officer completed Firearms Training Academy	2	0	2	2	100%
ACJA § 6-113(E)(2)(f); Officer completed competency test & training course on ACJA 6-112 & 113 & legal issues relating to firearms	2	0	2	2	100%
ACJA § 6-113(G)(3); CPO approves/disapproves request to carry within 30 days after officer completes all requirements	2	0	2	2	100%

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Firearms Standards	Yes	No	TOTAL	NA	% Compliance
ACJA § 6-113(H)(1); Officer signed form indicating officer understands terms & conditions in code and any department policy regarding use of firearms	2	0	2	2	100%
ACJA § 6-113(G)(4)(5); For denial, temporary suspension or revocation to carry, CPO must provide written reasons, place in personnel file & copy officer & officer's supervisor	0	0	0	4	NA
ACJA § 6-113(H)(3); Completed annual re-qualification & participated in all required practices sessions	3	0	3	1	100%

Department Response: The Department challenges the compliance percentage for ACJA § 6-113(H)(1); Officer signed form indicating officer understands terms & conditions in code and any department policy regarding use of firearms requirement as stated above.

AOC Response: The original compliance rate of 0% has been adjusted to 100% after the Department provided hard copies that the requirement had been met. The Overall Compliance section has been adjusted as well.

Required Action: None

Recommendation: None

Minimum Accounting Standards (MAS)

Pursuant to [ACJA § 1-401\(E\)\(1\) through \(8\)](#), [ACJA § 1-401\(F\)\(1\) through \(18\)](#)

Findings:
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard).
<input type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period.
<input checked="" type="checkbox"/> Does Not Meet Standard (requires corrective action. Improvement is needed in the areas noted below
<input type="checkbox"/> Standard Not Applicable

The operational review team obtained a copy of the department's most recent (Reporting Year: 2016) MAS Compliance Checklist which was completed by the department and received by the AOC Court Services Division prior to the deadline. The department has not submitted their triennial audit to the AOC Court

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Services Division since 2010. AOC Court Services Division also noted that La Paz County Adult Probation Department did not request an exception for the requirement to have an automated financial management system.

The payment acceptance policy was displayed in the main lobby and included code required specifics regarding methods of payment, receipt for payment, and dishonored payment policy.

All money orders and checks are kept in a locked bag, in an immovable locked vault, only accessible to authorized personnel until deposited. Money orders and checks are deposited daily if they total over \$300.00 by authorized personnel otherwise it is deposited weekly. Money stored overnight is stored in an immovable safe. The department does not accept cash payments and issues manual receipts. It was discovered that the department does not indicate on a VOIDED receipt the reason for the void and the reissued receipt does not reference the voided receipt.

Department Response: “The Department will submit a MAS Exception Request as well as any previous documentation/reports if possible. The Department will also develop a policy and procedures to address a voided receipt.”

Required Action: Provide AOC Court Services Department copies of triennial reports completed since 2010 and provide AOC APSD with confirmation of such. Provide a copy of the MAS Exception Request for calendar year 2018. Provide a copy of the policy addressing the process for voiding a receipt.

Recommendation: None

Financial and Statistical Reports

Pursuant to [ACJA § 6-201.01 \(F\)\(12-13\)](#), [ACJA § 6-201.01 \(F\)\(16-17\)](#), [ACJA § 6-202.01 \(F\)\(10-11\)](#), and [ACJA §6-202.01 \(F\)\(14-15\)](#)

Findings:

- | |
|--|
| <p><input type="checkbox"/> Exceeds Standard, substantially exceeds requirement of standard.</p> <p><input checked="" type="checkbox"/> Meets Standard, substantial compliance; complies in all materials ways with the standard for the relevant review period.</p> <p><input type="checkbox"/> Does Not Meet Standard, requires corrective action: improvement is needed in the areas noted below</p> <p><input type="checkbox"/> Standard Not Applicable.</p> |
|--|

According to the AOC APSD budget specialist, mid-year and closing reports were received from the department on time and are accurate. Monthly budget reports are also received in proper format within specified time frames.

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Code Standard for Financial	Compliance	
Closing financial and program activity report through December 31, 2016 submitted to AOC by January 31, 2017.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Closing financial and program activity report through June 30, 2016 submitted to AOC by August 31, 2016.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

According to AOC Data Specialist, annual hand count reports and performance measures were submitted on time.

Code Standard for Statistical Reports	Compliance	
Probation Departments operating an IPS program shall maintain and provide to the AOC data and statistics as may be required.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Probation Departments providing standard probation services shall maintain and provide to the AOC data and statistics as may be required.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
On request, Chief Probation Officer shall conduct hand counts of the department's IPS population and shall submit results of the hand counts.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
On request, Chief Probation Officer shall conduct hand counts of the department's standard probation population and shall submit results of the hand counts.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

Department Response: Not applicable

Required Action: None

Recommendation: None

Pre-sentence Report (PSR)

Pursuant to [Arizona Rules of Court 26.4\(b\)](#)

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Findings:

- ☐ Exceeds Standard, substantially exceeds requirement of standard.
- ☒ Meets Standard, substantial compliance; complies in all materials ways with the standard for the relevant review period.
- ☐ Does Not Meet Standard, requires corrective action: improvement is needed in the areas noted below
- ☐ Standard Not Applicable.

For the fiscal year 2016 (July 1, 2015 to June 30, 2016), the department reported approximately 164 PSRs were prepared, this contrasts with APETS which indicates 150 presentence reports were filed. The department reported that “six reports filed before July 1, 2016 were continued and sentenced after July 1, 2016. Three reports appear in APETS as being late but this is due to offender noncompliance and the other report that appears as late is due to the offender taking a plea.”

The department indicated in the Self-Assessment Questionnaire (SAQ) that 98 percent of the 164 PSRs were submitted to the Judge within two business days of sentencing.

Department Response: Not applicable

Required Action: None

Recommendation: None

Fleet Management

Pursuant to [ACJA § 6-111](#), [A.R.S. § 38-538.02](#), and the Arizona Department of Administration Fleet Management Rule R2-15-202.

Findings:

- ☐ Exceeds Standard, substantially exceeds requirement of standard.
- ☒ Meets Standard, substantial compliance; complies in all materials ways with the standard for the relevant review period.
- ☐ Does Not Meet Standard, requires corrective action: improvement is needed in the areas noted below
- ☐ Standard Not Applicable.

According to the AOC, APSD Fleet Specialist, the department is in compliance with fleet management requirements. The department consistently submits their reports on time.

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Code Standard for State Fleet	Compliance	
Department maintains a vehicle database or log that shall include, but not limited to; name of operators and location of vehicle.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Department submits monthly vehicle mileage reports.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Department conducts annual Motor Vehicle Department (MVD) reviews of all department employees operating a state vehicle.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Chief Probation Officer shall delegate management of the departments' state vehicles to an employee of the department.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
State vehicle damage or loss is reported to the AOC and ADOA Fleet Management within the next business day.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

Department Response: Not applicable

Required Action: None

Recommendation: None

COMMUNITY PROTECTION

The probation department has a responsibility to enhance public safety through careful supervision and monitoring of individuals receiving a suspended sentence. The review team assessed the department's compliance with these criteria in the following areas:

- Minimum contact standards for standard supervision cases
- Minimum contact standards for intensive supervision cases
- Minimum contact standards for sex offender cases
- Management of absconder cases
- Victim notification requirements

AOC policy requires officers to enter probationer contacts/case notes into the APETS within 72 hours. During January 1, 2016 to December 31, 2016, there were 3,645 total entries of which 2,393 (66 percent) were entered on time with 1,252 (34 percent) entered late.

Standard Probation Supervision (SPS) Contacts

Pursuant to [ACJA § 6-201.01\(K\)\(8\)\(a\)](#), [ACJA § 6-201.01\(K\)\(6\)](#), [ACJA § 6-201.01\(K\)\(4\)\(a, b\)](#)

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Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The case record review consisted of 37 offender case files along with review of APETS documentation. The three-month review period was September, October, and November 2016. Average compliance during the three-month review period was 89 percent.

Supervision Level	September 2016	October 2016	November 2016
Minimum	6	7	7
Medium	21	19	20
Maximum	2	2	2
TOTAL¹	29	28	29

¹Review of contact for some case files was not applicable because probationers' start dates were the following month and/or probationer was on IPS/Jail/DOC for that review period.

Credit was not given for a collateral contact if the Contacts/Case Notes screen in APETS did not contain meaningful dialogue with the person.

Required SPS Minimum Level Supervision Contacts			
Requirement Met	September 2016	October 2016	November 2016
Yes	1	2	3
No	0	0	0
Total	1	2	3
% in Compliance	100%	100%	100%

Required SPS Medium Level Supervision Contacts			
Requirement Met	September 2016	October 2016	November 2016
Yes	19	19	18
No	1	0	2
Total	20	19	20
% in Compliance	95%	100%	95%

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Required SPS Maximum Level Supervision Contacts			
Requirement Met	September 2016	October 2016	November 2016
Yes	0	0	1
No	2	2	1
Total	2	2	2
% in Compliance	0%	0%	50%

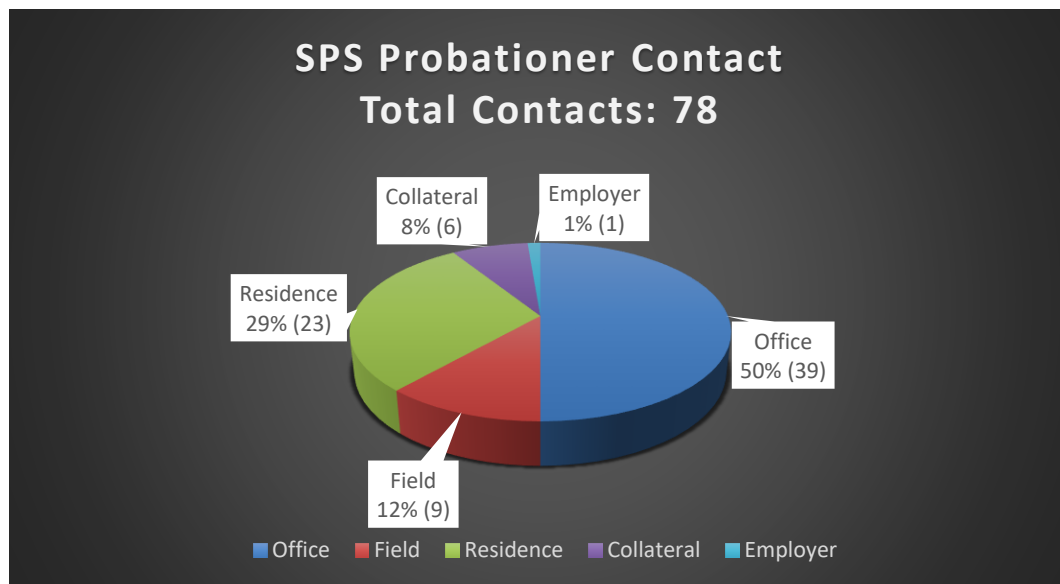
Department Response: “The Department has monthly random case file reviews in place. The supervisor will do a random sampling of two cases per officer per month. The supervisor will also do a biweekly visual APETS check of each caseload to evaluate if contacts are being made. Staff will receive additional training on utilizing tools within APETS to assist them in making required contacts. Policies referring to contact standards will be updated as needed and submitted to AOC.”

Note: “It was discovered that one of the adult officers was mistaken that case notes could be entered up to 10 days after the contact as the pop up window in APETS warns. It was clarified with the officer that case notes must be entered within 3 days/72 hours of the contact. This will be monitored by case file reviews.”

“The IPS work week will be verified in APETS as well as the department’s sex offender contact requirements per supervision level are accurate in APETS.”

Required Action: Provide a timeline for officer training, a copy of the random sampling checklist, and revised policies.

Recommendation: None



Recommendation: Although minimum residential contacts are not prescribed in the ACJA, the department should consider setting minimum expectations for residential and community probation contacts.

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Intensive Probation Supervision (IPS) Contacts

Pursuant to [ACJA § 6-202.01 \(N\) \(3\)\(a\), \(4\)\(a\), \(5\)\(a\), \(6\)\(a\)](#) and [ACJA § 6-202.01 \(O\) \(6\)\(a\), \(7\)\(a\), \(8\)\(a\) \(9\)\(a\)](#)

Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The department has a one-person IPS team. For offender and employer contact compliance review, four intensive probation cases were reviewed for contact/case note compliance. A review of the Contacts/Case Notes screen in APETS revealed the overall average for achieving IPS statutory weekly contact requirements was 70 percent during a 12-week period from September 25, 2016 to December 17, 2016.

In accordance with ACJA 6-202.01 (O), the following represents IPS Probationer Contacts for a one-person IPS team during the review period:

**IPS CONTACTS SUMMARY – September 25, 2016 to December 17, 2016
1 Person IPS Team**

Requirement Met	Week											
	1	2	3	4	5	6	7	8	9	10	11	12
Yes	0	0	0	0	1	2	2	2	2	2	2	3
No	0	0	1	1	1	0	0	0	1	1	1	1
NA ¹	0	0	2	2	1	1	1	1	0	0	0	0
Total	0	0	3	3	3	3	3	3	3	3	3	4
% in Compliance	NA	NA	0%	0%	50%	100%	100%	100%	67%	67%	67%	67%
Average Compliance Rate	70%											

¹NA refers to intensive probationers in jail, DOC, residential treatment, or recently transitioned to standard supervision.

In accordance with ACJA 6-202.01(O) the following represents IPS Probationer with Employers Contacts for the one-person IPS team during the review period:

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**IPS Contact with Employers – September 25, 2016 to December 17, 2016
1 Person IPS Team**

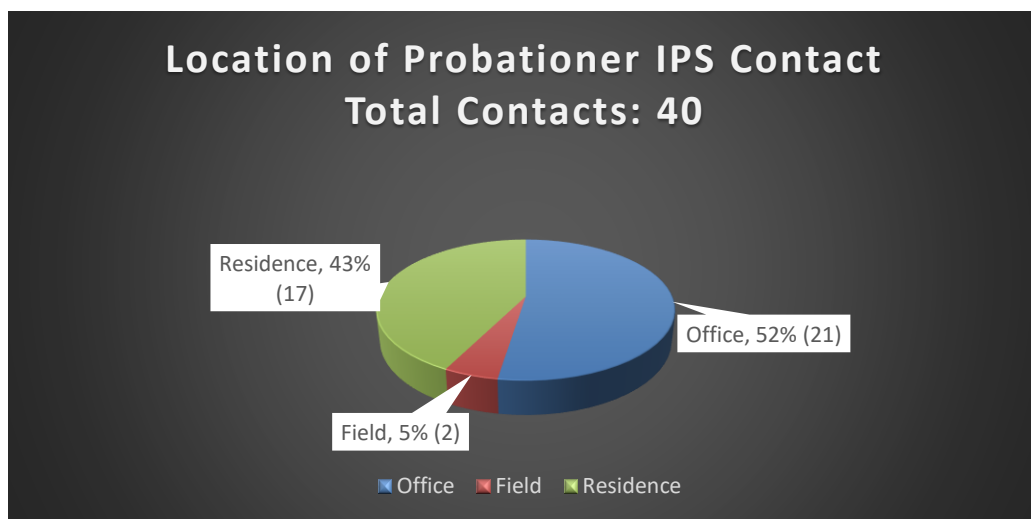
Requirement Met	WEEK											
	1	2	3	4	5	6	7	8	9	10	11	12
Yes	0	0	0	0	0	0	0	0	0	0	0	0
No	0	0	0	0	0	1	1	1	1	1	2	2
N/A ¹	0	0	0	0	1	1	1	1	2	2	2	2
Total	0	0	0	0	1	2	2	2	3	3	4	4
% in Compliance	NA	NA	NA	NA	NA%	0%	0%	0%	0%	0%	0%	0%
Average Compliance Rate	0%											

¹NA refers to intensive probationers in jail, DOC, residential treatment, or recently transitioned to standard supervision.

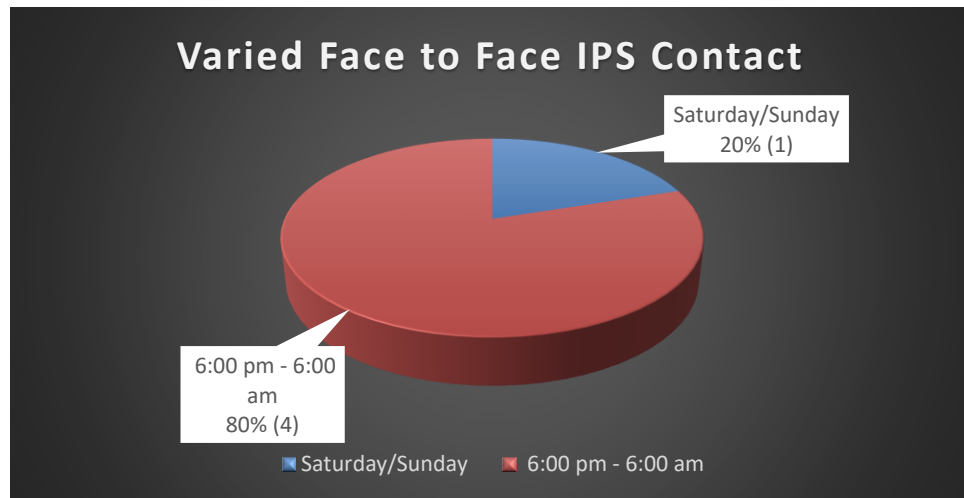
Department Response: “The Department has monthly random case file reviews in place. The supervisor will complete a random sampling of two cases per officer per month. The supervisor will also do a visual APETS check of each caseload once a week to evaluate if contacts are being made. Staff will receive additional training on utilizing tools within APETS to assist them in making required contacts and that the employment screen is accurate. Policies referring to contact standards will be updated as needed and submitted to AOC.”

Required Action: Provide a timeline for officer training, a copy of the random sampling checklist, and revised policies.

Recommendation: None



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Recommendation: Although minimum residential contacts are not prescribed in the ACJA, the department should consider setting minimum expectations for residential and community probation contacts.

Sex Offender Contacts

Pursuant to [ACJA § 6-201.01\(K\)\(8\)\(a\)](#), [ACJA § 6-201.01\(K\)\(6\)](#) and [ACJA § 6-201.01\(K\)\(4\)\(a, b\)](#)

Findings:

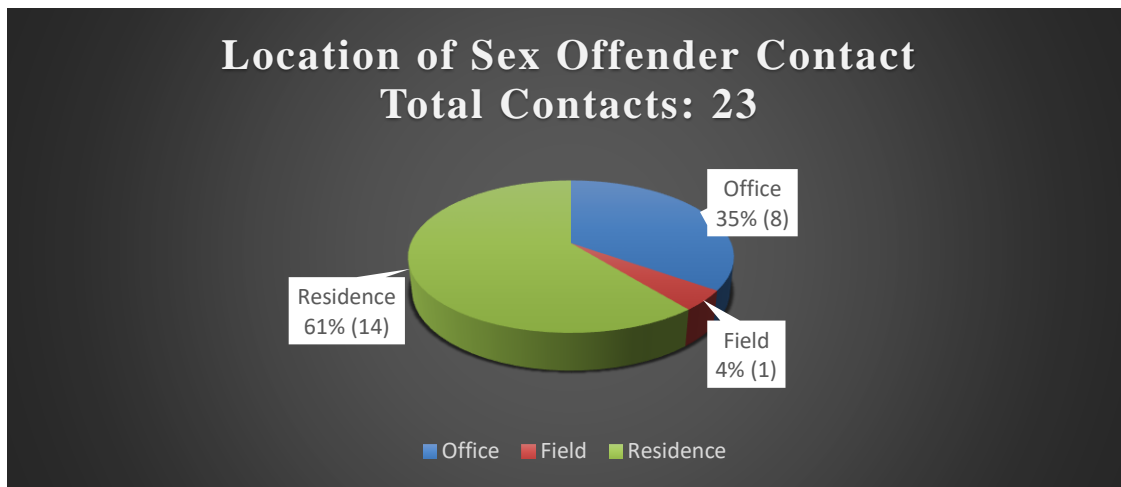
- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The case record review consisted of seven sex offender case files (all SPS) along with review of APETS documentation.

The three-month review period was September, October, and November 2016. Of the seven sex offenders, one offender does not have sex offender conditions nor registration requirement.

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Required Supervision Contacts for Sex Offender Cases			
Requirement Met	September 2016	October 2016	November 2016
Yes	3	2	3
No	4	5	4
Total	7	7	7
NA	0	0	0
% in Compliance	43%	29%	43%



Department Response: “During the pre-draft phase, the department implemented a policy change addressing sex offender contact standards. La Paz County Adult Probation’s policy S-7 Sex Offender Guidelines requires that minimum supervision contact standards are based on notification Levels I, II, and III. Requirements are three contacts per month for Level III, two contacts per month for Level II, and one contact per month for Level I.”

“The Department has monthly random case file reviews in place. The supervisor will complete a random sampling per month. The supervisor will also do a visual APETS check of the IPS caseload once a week to evaluate if contacts are being made. Staff will receive additional training on utilizing tools within APETS to assist them in making required contacts. Policies referring to contact standards will be updated as needed and submitted to AOC.”

Required Action: Provide copy of training timeline for officers. Also, provide revised policies which reference contact standards.

Recommendation: Policy S-7 does not clearly state that Levels are based on assessed risk. The Department should consider adding language that would distinguish notification Levels, as mentioned in the policy, from supervision Levels, i.e. supervision Levels may be adjusted and changed as the offender adjusts to and progresses positively through their period of probation as determined by assessed risk.

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Absconders/Warrants

Pursuant to [ACJA § 6-105.01 \(E\)\(2\)\(g\)\(1\)](#), [ACJA § 6-105.01 \(E\)\(2\)\(g\)\(3\)](#), [ACJA § 6-105.01 \(E\)\(2\)\(g\)\(4\)](#), [ACJA § 6-105.01 \(E\)\(2\)\(g\)\(6\)](#), [A.R.S. § 13-805\(C\)\(1\)\(2\)](#), [A.R.S. § 13-105\(1\)](#), [ACJA § 6-105.01 \(E\)\(2\)\(g\)\(5\)](#) and [ACJA § 6-201.01\(J\)\(10\)\(a through g\)](#).

Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Documentation in APETS/files were reviewed for 17 absconder cases (all SPS). At the time, the sample of cases to be reviewed was generated, the cases were identified as absconders/warrants. Subsequently, some of the probationers may have been apprehended, sentenced to the department of corrections and/or terminated; nevertheless, at the time of the on-site review the case was reviewed as an absconder/warrant case. The review findings are listed in the tables below:

Activity to Locate <u>Before</u> Warrant Issued	Yes	No	% in Compliance	N/A	Total Cases
IPS Warrant Requested within 72 Hours	0	0	NA	17	17
SPS Warrant Requested within 90 days	12	3	80%	2	17
Residence Checked	5	5	50%	7	17
Collaterals Checked	6	5	55%	6	17
Employment Checked	0	2	0%	15	17
Certified Letter Sent	1	10	10%	6	17
Activity to Locate <u>After</u> Warrant Issued	Yes	No	% in Compliance	N/A	Total Cases
After warrant issued, a criminal history check done	7	4	64%	6	17
Residence Checked	0	8	0%	9	17
Employment Checked	0	1	0%	16	17
Opted-In Victim Notified	1	0	100%	16	17
Annual Records Check	5	3	63%	9	17

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Requirement Met	If Warrant After 7/20/2011, CRO Filed Within 90 Days	Whereabouts Determined
Yes	2	5
No	8	12
Total	10	17
% in Compliance	20%	NA
N/A	7	0

Department Response: “The Department has since updated the warrants policy to be consistent with ACJA and ISC Rules. Management will meet with the Adult Probation Officers to discuss the updated policy. Continued monthly caseload reviews will ensure compliance with the updated policy.”

“The Department will implement a quick checklist that must accompany the Petition to Revoke when submitted to the supervisor for review. The supervisor will verify those attempts were made and documented in APETS. Officers will be trained on this process to meet requirements. Caseload reviews will be done on warrant cases for the 90 days the case remains with the officer to ensure attempts are continuing to be made to locate the absconder.”

“Support staff will run a monthly quality assurance report of outstanding petitions with warrants and disperse to officers and the supervisor. When the warrant reaches the 90-day mark, the assigned officer will notify the appropriate personnel in the Clerk of Court’s office that a CRO must be issued. When the CRO is received from the Clerk’s office, the officer will submit the file to support staff to transfer case to a warrants caseload.”

“The Clerk’s Office has completed the required Criminal Restitution Orders (CRO). Moving forward, the Adult Probation Officers have been advised that they must run a criminal history and then email the Clerk’s Office to request a CRO 90 days after a warrant is issued. Policy has been updated to reflect this change. Monthly case reviews will ensure compliance with this requirement.”

Required Action: ACJA § 6-105.01(E)(2)(g)(6) states, “When a petition to revoke is filed prior to the expiration of 90 days, the probation officer shall seek a criminal restitution order upon the expiration of 90 days...”

Recommendation: Probation Officer’s training should be that a CRO must be filed prior to the 90 days.

Sex Offenders

Pursuant to [A.R.S. § 13-3821](#), [A.R.S. § 13-3822](#), [A.R.S. § 13-3821\(J\)](#), [A.R.S. § 13-610](#), [A.R.S. § 13-3825](#)

The relevant code in effect during the review period, [ACJA § 6-201.01\(K\)](#), requires a varied residential contact for Standard Probation Supervision (SPS) frequency based on supervision level, but none are specifically directed at residence or employment verification upon placement on probation or release from custody. However, verifying a probationer’s residence and workplace within 30 days of beginning supervision/release (current best practice) will provide the officer with insight into a probationer’s needs and overall situation.

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The time period of the files reviewed for the Operational Review there was no statute, code, or departmental policy regarding SPS residence verification. However, best practice indicates this should be completed within 30 days of sentencing/release from custody.

Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Seven sex offender (SO) case files were reviewed. Information in APETS, as well as documentation in case files, was used to determine compliance in the following areas.

The requirement for sex offender registration was not applicable for three cases (the probationers were not required to register).

The requirement to register a change of address was not applicable for four cases as those cases were not statutorily required to register or they did not change their place of residence.

Summary of Sex Offender Requirements	Yes	No	% Compliant	N/A	Total
Registration within 10 days	3	1	75%	3	7
New residence verified w/in 30 days (SPS)/72 hours (IPS)	4	3	57%	0	7
Address/name change notification change within 72 hours	0	3	0%	4	7
Yearly identification	2	2	50%	3	7
DNA within 30 days	7	0	100%	0	7
Annual polygraphs	3	0	NA	4	7
Referred to treatment	3	1	75%	3	7

Department Response: “The current probation officer supervising the sex offender population and the deputy chief reviewed the seven cases that were audited. “We believe we identified which cases needed documentation of a specific requirement and the documentation missing is now in the case file.” Sex offender case files will now have a specific tab in the first portion of the file with the following marked separately: 1) Registrations/Risk Assessment-Community Notification 2) DMV – ID’s 3) Polygraphs 4) Treatment 5) SO specific directives 6) Supervision Level Changes. The Supervisory Case File Audit Form has been revised to contain the specific SO requirements.”

“There is a question concerning the referred to treatment requirement. Only four cases of the seven were true sex offenders with sex offender conditions and registration requirements. It appears all seven were

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reviewed for this requirement and one was not in compliance. However, we believe in the four true sex offender cases, a treatment referral was done in each.”

AOC Response: As reflected above the “Referred to Treatment” score has been changed based on the department’s response.

Required Action: None

Recommendation: None

Global Positioning System (GPS)

Pursuant to [A.R.S. § 13-902\(G\)](#) and [AD 2011-41](#).

Findings:

- | |
|--|
| <p><input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard: (101% and above)</p> <p><input type="checkbox"/> Meets Standard (substantial compliance; complies in all materials ways with the standard for the relevant review period: (100%-90%)</p> <p><input type="checkbox"/> Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below</p> <p><input checked="" type="checkbox"/> Standard Not Applicable</p> |
|--|

At the time of the review, the department reported not having probationers on GPS.

Signed Review/Acknowledgement of Terms and Conditions

Pursuant to [Arizona Rules of Criminal Procedure 27.1](#)

Findings:

- | |
|--|
| <p><input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard: (101% and above)</p> <p><input type="checkbox"/> Meets Standard (substantial compliance; complies in all materials ways with the standard for the relevant review period: (100%-90%)</p> <p><input checked="" type="checkbox"/> Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below</p> <p><input type="checkbox"/> Standard Not Applicable</p> |
|--|

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A signed Review and Acknowledgement form was contained in 30 of the 37 SPS files reviewed and 4 of the 4 IPS files reviewed.

Summary of Review and Acknowledgement forms				
Type of Probation	Yes	No	Total	% in Compliance
SPS	30	7	37	81%
IPS	4	0	4	100%

Department Response: “The Department will do further training with staff that the Receipt and Acknowledgment form must be completed and contained in the file with a copy of the conditions of probation. Regular case file reviews will find any missing documents.”

Required Action: Provide a copy of the training timeline. Also, provide a copy of the Initial Visit Checklist.

Recommendation: None

DNA Collection

Pursuant to [A.R.S. §13-610\(C\), \(D\) and \(G through O\)](#)

Arizona Revised Statute requires the collection of DNA within 30 days after a person is placed on probation or the arrival of a person who is accepted under ISC. The department’s DNA policy, S-27, requires collection with 72 hours. The review was conducted using the department’s higher collection standard.

Findings:

- | |
|---|
| <p><input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard: (101% and above)</p> <p><input type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))</p> <p><input checked="" type="checkbox"/> Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below</p> <p><input type="checkbox"/> Standard Not Applicable</p> |
|---|

The case record review consisted of 37 SPS case files and 4 IPS case files along with review of APETS documentation.

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SPS DNA Collection

SPS DNA Collection/Verification within 72 hours Per La Paz policy	
Yes	11
No	7
Total	18
% in Compliance	61%
NA¹	19

¹another agency/county responsible for DNA collection/verification or DNA would have been verified in an earlier operational review

SPS DNA Collection/Verification If it is not the probationer's 1st felony offense did the officer verify DNA was in the DPS databank within 72 hours per La Paz policy of being placed on probation or acceptance of incoming ISC	
Yes	2
No	8
Total	10
% in Compliance	20%
NA¹	27

¹another agency/county responsible for DNA collection/verification or DNA would have been verified in an earlier operational review

IPS DNA Collection

IPS DNA Collection/Verification within 72 hours Per La Paz policy	
Yes	3
No	0
Total	3
% in Compliance	100%
NA¹	1

¹another agency/county responsible for DNA collection/verification, DNA taken while probationer on SPS or DNA would have been verified in an earlier operational review

IPS DNA Collection/Verification If it is not the probationer's 1st felony offense did the officer verify DNA was in the DPS databank within 72 hours per La Paz policy of being placed on probation or acceptance of incoming	
Yes	1

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No	0
Total	1
% in Compliance	100%
NA ¹	3

¹another agency/county responsible for DNA collection/verification, DNA taken while probationer on SPS or DNA would have been verified in an earlier operational review

Department Response: “The Department’s policy regarding DNA was updated during the Pre-Draft stage of the audit to reflect statute requirement of DNA being collected within 30 days of sentencing. The Department has implemented a quality assurance measure of a support staff member verifying DNA samples are on file with DPS, entering the verification in APETS, and printing the verification for the file.”

Required Action: Provide a copy of the department’s quality assurance process to ensure continued compliance.

Recommendation: None

VICTIMS’ RIGHTS

Victim Contacts

Pursuant to [A.R.S. §13-4415 \(B\)\(1-5\)](#) , [ACJA § 6-103\(E\)\(8\)](#)

Findings:

- | |
|---|
| <p><input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard: (101% and above)</p> <p><input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%)</p> <p><input type="checkbox"/> Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below</p> <p><input type="checkbox"/> Standard Not Applicable</p> |
|---|

The case record review consisted of 37 SPS case files and 4 IPS case files along with review of APETS documentation.

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SPS Victim Contacts

SPS - Victim Contact			
Requirement Met	Pre-sentence Contact	Victim Opt-In	Notice of Changes Given
Yes	10	1	1
No	0	9	0
Total	10	10	1
% in Compliance	100%	NA	100%
NA	27	27	36

IPS Victim Contacts

Requirement Met	Pre-sentence Contact	Victim Opt-In	Notice of Changes Given
Yes	2	0	0
No	0	2	0
Total	2	2	0
% in Compliance	100%	NA	NA%
NA	2	2	4

Department Response: Not applicable

Required Action: None

Recommendation: None

OFFENDER ACCOUNTABILITY

Pursuant to [ACJA § 6-103\(E\)\(8\)\(g\)](#), [A.R.S. § 13-901](#), [A.R.S. § 13-914\(E\)\(2\)](#), and [A.R.S. § 13-918\(B\)](#)

The enforcement of court-ordered financial obligations such as restitution and probation service fees (PSF) are integral parts of probation supervision, the absence of which undermines probationer accountability and mitigates the sentence imposed. During the operational review, intensive and standard probation case records were reviewed to assess the department's enforcement of financial obligations.

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Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

A summary of offenders' financial status is maintained in each case file. The case record review consisted of 37 SPS case files. Restitution was ordered in five of 37 standard cases reviewed and probation supervision fees were ordered in 24 of 37 case files reviewed. Information in the case file/financial file/APETS and information from the department revealed the following:

SPS Financials

Standard Restitution			
Requirement Met	Restitution Current	Court Notified	Opted in Victim Notified
Yes	2	2	1
No	3 ¹	3 ¹	0 ¹
Total	5	5	1
% in Compliance	40%	40%	100%

¹Court/victim notification of delinquent restitution not found in files/no documentation Contacts/Case Notes in APETS, Restitution is "delinquent" where payments are in arrears two or more months.

Standard Probation Service Fees (PSF)	
Requirement Met	PSF Current
Yes	2
No	22
Total	24
% in Compliance	8%
NA	13

Probation Officers addressed all court financial delinquencies in 20 (90 percent) of 22 applicable cases.

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IPS Financials

A summary of offenders' financial status is maintained in each case file. The case record review consisted of four IPS case files. Restitution was not ordered in the four IPS cases reviewed and probation supervision fees were ordered in three of the four IPS case records reviewed. Information in the case file/financial file/APETS and information from the department revealed the following:

IPS Restitution			
Requirement Met	Restitution Current	Court Notified	Opted in Victim Notified
Yes	NA	NA	NA
No	NA	NA	NA
Total	NA	NA	NA
% in Compliance	NA	NA	NA

Intensive Probation Service Fees (PSF)	
Requirement Met	PSF Current
Yes	0
No	3
Total	3
% in Compliance	0%
NA	1

Probation Officers addressed all the financial delinquencies in three (100 percent) of three applicable cases.

Department Response: “Confused as percentages are 90% and 100% for compliance. Probation Officers addressed all court financial delinquencies in 20 (90 percent) of 22 applicable cases. Probation Officers addressed all the financial delinquencies in three (100 percent) of three applicable cases.”

AOC Response: The SPS and IPS Financial section is three-fold; court notification, victim notification, and officer addressing delinquencies. The Department's compliance rate for SPS court notification is 40%.

Required Action: The department must develop and implement a quality assurance program to ensure compliance rates of 90 percent or above are met and sustained in all areas. Provide a copy of the department's quality assurance process to ensure continued compliance.

Recommendation: None

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IPS Collection of Probationer Wages

Pursuant to [A.R.S. § 13-918\(B\)](#)

The Chief Probation Officer established an IPS checking account in accordance with statute. IPS probationers submit their wages to the department. The department issues a receipt and, after payment is made, the remaining balance is returned to the probationer that afternoon or the following day.

Findings:

- | |
|--|
| <input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard: (101% and above) |
| <input type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%)) |
| <input checked="" type="checkbox"/> Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below |
| <input type="checkbox"/> Standard Not Applicable |

A summary of offenders' financial status is maintained in each case file. The case record review consisted of four IPS cases. Information in the case file/financial file/APETS and information from the department revealed the following:

Paychecks/Wages Submitted by Probationers on IPS					
	Yes	No	Total	% in Compliance	NA
Wages submitted	0	2	2	0%	2

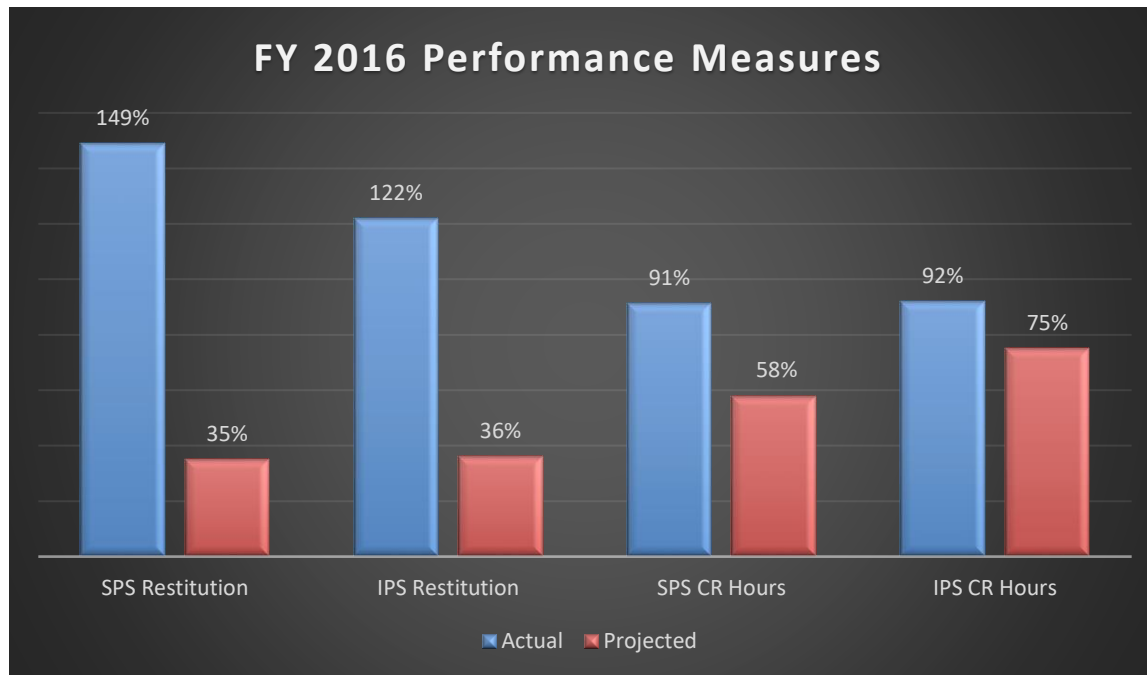
Department Response: "The Department will do further training for staff involved with any part of the collection of IPS wages. The Department can only assume that the issue of noncompliance in this area is because of a lack of paystub copies in the case file and the APETS taxes withdrawn screen not continuously updated. Staff will copy the probationer's paystub/paycheck and submit to the IPS officer for filing in the case file and entering the tax information into APETS."

Required Action: Provide a timeline for staff training and a copy of the supervisors random auditing checklist.

Recommendation: None

Performance Measures Comparison

The department reported on performance measures for restitution and community restitution (CR) hours achieved for FY 2016. The department exceeded performance measures expectations for IPS and SPS.



SPS Community Restitution (CR) Hours

Pursuant to [A.R.S. § 13-914\(E\)\(6\)](#), [ACJA § 6-201.01\(K\)\(5\)\(d\)](#), [\(7\)\(c\)](#), and [\(8\)\(d\)](#), and [ACJA § 6-201.01\(J\)\(1\)\(g\)](#), and [ACJA § 6-202.01\(I\)\(1\)](#)

Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

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The case record review consisted of 37 SPS case files and 4 IPS case files for the time period September, October, and November 2016.

SPS Community Restitution (CR) Hours

SPS Monthly Community Restitution Requirement Met				
Monthly CR Hours Completed	September 2016	October 2016	November 2016	Officer Addressed Delinquency
Yes	0	0	0	0
No	1	1	1	1
Total	1	1	1	1
% in Compliance	0%	0%	0%	0%
NA¹	36	36	36	36

¹CR hours were: not ordered, discretionary, or completed prior to the review period.

IPS Community Restitution (CR) Hours

IPS Monthly Community Restitution Requirement Met				
Monthly CR Hours Completed	September 2016	October 2016	November 2016	Officer Addressed Delinquency
Yes	0	1	2	NA
No	0	0	0	0
Total	0	1	2	NA
% in Compliance	NA	100%	100%	NA
NA¹	4	3	2	NA

¹probationer was in prison, jail, treatment, hospital, severe drug issues, missing, or CR hours were waived

Department Response: “Monthly case reviews will ensure compliance with this requirement.”

Required Action: Provide a copy of the monthly case file audit checklist.

Recommendation: None

CASE MANAGEMENT

SPS

SPS Residence and Employment Verification

The relevant code in effect during the review period, [ACJA § 6-201.01\(K\)](#), requires a varied residential contact frequency based on supervision level, but none are specifically directed at residence or employment verification upon placement on probation or release from custody. At the time of this Operational Review there is no statute, code, or departmental policy regarding SPS residence verification. However, best practice indicates this should be completed within 30 days of sentencing/release from custody as it will provide the officer with insight into a probationer's needs and overall situation.

Findings:

- | |
|--|
| <input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard: (101% and above) |
| <input type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%)) |
| <input checked="" type="checkbox"/> Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below |
| <input type="checkbox"/> Standard Not Applicable |

The case record review consisted of 37 SPS case files. Not all probation officers use the Address/Employment History screens in APETS to document the date verified. Therefore, the operational review team read through the contact notes for each case to determine compliance.

Standard Supervision Residence & Employment Verification		
	Residence Verification within 30 Days (Initial and Changes)	Initial Employment Verification (within 30 days)
Yes	18	13
No	14	4
Total	32	17
% of the time completed	56%	76%
N/A	5	20

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Department Response: “The Department will do additional APETS training on the necessity of entering verification dates as well as make sure that policies are updated relating to residence and employment. The Department believes the noncompliance cases are those either of lower jurisdiction cases or incoming ISC cases. Officers will be further trained that requirement deadlines are from Notice of Arrival for incoming ISC cases. Supervisor case file audit reviews will also find if either of these verification dates has not been entered.”

Required Action: Provide a copy of the staff training timeline and a copy of the case file audit checklist. Also, provide a copy of the updated policies.

Recommendation: None

SPS OST/FROST Timeline Compliance

Pursuant to [ACJA § 6-201.01\(J\)\(5\)\(a\)\(1\)](#), [ACJA § 6-105.01\(E\)\(2\)\(b\)\(1\)\(c\)](#), and [ACJA § 6-105.01\(E\)\(2\)\(b\)\(1\)\(g\)](#)

Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The case record review consisted of 37 SPS case files and APETS documentation.

SPS Offender Screening Tool (OST) Completed within 30 days	
Yes	30
No	7
Total	37
% in Compliance	81%
N/A	0

The case record review consisted of 37 SPS case files and APETS documentation, in which 60 FROST assessments were conducted.

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FROST¹ Completed for Standard Supervision Cases (180 Days)	
Yes	31
No	29
Total	60
% in Compliance	52%
N/A	126

¹The FROSTs for the past three years were reviewed.

Department Response: “The seven OST assessments may have been on lower jurisdiction cases and/or incoming ISC cases as the OST is completed by the presentence report writer on all new Change of Pleas from the Superior Court. The Department will conduct further training on the necessity of the OST and FROST being completed within the necessary time frames on all appropriate cases including that the Notice of Arrival on incoming ISC cases is the trigger date for requirement timelines. The Department will also do further training with officers to ensure they utilize the Notifications screen and other tools within APETS to assist them in Case Management. Regular supervisor case file audits will identify if there are ongoing issues with officers meeting these timeframes.”

Required Action: Provide a copy of the staff training outline and supervisor case file audit checklist.

Recommendation: None

SPS Assessment Score Matching Supervision Level

The team reviewed supervision levels of the selected cases to determine if they agreed with assessment or reassessment scores. The post-sentence supervision assignment sheet (updated in August 2014) requires assessment scores of 0-5 (males), 0-8 (females) be supervised under standard, minimum supervision requirements. Assessment scores of 6–17 (males), 9-20 (females) will be supervised under the standard, medium supervision requirements, and assessment scores of 18 and higher (males), 21 and higher (females) will be supervised under the standard, maximum supervision requirements.

Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

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Each of the 37 SPS cases were compared to the above standards using the current supervision level and OST/FROST. On average 78 percent of the time the supervision level matched the assessment score.

Supervision Level Matches Assessment Scores for Standard Supervision			
Requirement Met	Maximum	Medium	Minimum
Yes	1	19	4
No	0	5	3
Total	1	24	7
% in Compliance	100%	79%	57%
NA¹	1	4	0

¹Most recent risk score was not in the case file and/or APETS

Department Response: “Regular and consistent supervisor case file reviews will verify if supervision level is equal to assessment results. The Department will also do further APETS training for officers to review Supervision Level after OST/FROST assessments are completed.”

Required Action: Provide a copy of the staff training outline and supervisor case file audit checklist.

Recommendation: None

SPS Case Plan Timeline

Pursuant to [ACJA § 6-201.01\(J\)\(5\)\(a\)\(4\)](#), [ACJA § 6-201.01\(J\)\(5\)\(a\)\(7-8\)](#), [AJCA 6-201.01\(J\)\(1\)\(I\)](#)

An important aspect of case planning is to ensure that probationers are included in the development of goals and strategies. The probationer is a valuable resource in identifying solutions to the needs targeted on the OST or FROST.

Case plans are reviewed, using EBP practices as a guide, to ensure probation officer strategies to monitor compliance and accomplish the objectives are stated along with measurable strategies for the probationer and probation officer. The minimum level supervision cases were reviewed to determine if a case plan was completed if required.

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Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The case record review consisted of 37 SPS case files and APETS documentation. Initial case plans are due within 60 days and follow-up case plans every 180 days.

SPS Case Plans ¹	Yes	No	Total	% in Compliance	NA ²
Initial CP completed within 60 days	22	7	29	76%	8
Follow-up completed every 180 days	16	27	43	37%	142 ¹
Probation officer strategies to monitor compliance and accomplish the objectives	22	5	27	81%	10
Measurable strategies for the probationer and probation officer	14	13	27	52%	10
Completed for minimum level supervision cases if required	4	1	5	80%	32

¹The Case Plans for the past three years were reviewed for each applicable case file.

²Another agency/county responsible for initial case plan, and/or follow-up case plan, case plan not necessary for the applicable case and/or case plan not necessary at the time of the operational review or would have been verified in an earlier operational review.

Department Response: “The Department will do further training with officers on the timeframes and SMART case goal planning. Regular supervisor case file audits will ensure timeframes are being met, case plans are SMART, and officer’s continued monitoring of goal plans.”

Required Action: Provide a copy of the staff training outline and supervisor case file audit checklist.

Recommendation: None

SPS Highest Criminogenic Need Areas Addressed on Case Plan

Pursuant to [ACJA § 6-201.01\(J\)\(5\)\(a\)\(3\)](#)

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EBP requires that areas in the OST/FROST reflecting higher scores and/or higher need be addressed in the narrative of the case plan. If not addressed, an explanation should be provided in the case plan or Contacts/Case Notes screen in APETS/case record. This was reinforced in AOC case plan training sessions.

Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☐ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The most recent case plan in APETS was reviewed. Of the 43 case plans reviewed, 15 have at least one score of 60 percent or above/high score/high need on the current OST/FROST as indicated below.

High Domain Scores on the Current OST/FROST Addressed in the Case Record – 43 Case Plans Reviewed	
Yes	15
No	0
Total	15
% in Compliance	100%
N/A	22

Department Response: Not applicable

Required Action: None

Recommendation: None

SPS Case Plan Signatures

Pursuant to [ACJA § 6-201.01\(J\)\(5\)\(a\)\(4\)](#)

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Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The case record review consisted of 37 SPS case files. Case plan signatures indicate the probationer and supervising officer are aware of the goals to be addressed during each contact and that the probationer participated in the case planning.

SPS Most Recent Case Plan Contain All Required Signatures	
Yes	23
No	4
Total	27
% in Compliance	85%
N/A	10

Department Response: “Regular supervisor case file reviews will find any case plans that are lacking any signatures.”

Required Action: Provide a copy of the supervisor case file audit checklist.

Recommendation: None

IPS

Photo in File

Pursuant to [ACJA § 6-202.01\(P\)\(2\)\(c\)](#)

The case record review consisted of four IPS case records.

Verification of Employment

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Pursuant to [ACJA § 6-202.01\(N\)\(3\)\(c\), \(4\)\(b\), \(5\)\(b\), \(6\)\(b\)](#)

The case record review consisted of four IPS case records. Employment verification was not applicable in three of the four case records reviewed (e.g., job search, disabled, retired, full-time student, in treatment, health issue, self-employed).

Verification of Job Search/Community Restitution Six Days Per Week

Pursuant to [A.R.S. § 13-914\(E\)\(1\)](#)

The case record review consisted of four IPS case records.

Verification of Residence

The relevant code in effect during the review period, [ACJA § 6-202.01\(N\)](#), requires a varied residential contact frequency based on supervision level, but none are specifically directed at residence verification upon placement on probation or release from custody. At the time of this Operational Review there is no statute, code, or departmental policy regarding IPS residence verification. However, best practice indicates this should be completed within 72 hours of sentencing/release from custody as it will provide the officer with insight into a probationer's needs and overall situation.

Findings:

- | |
|---|
| <input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard: (101% and above) |
| <input type="checkbox"/> Meets Standard (substantial compliance; complies in all materials ways with the standard for the relevant review period: (100%-90%)) |
| <input checked="" type="checkbox"/> Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below |
| <input type="checkbox"/> Standard Not Applicable |

Intensive Probation Cases

Requirement Met	Photo in File	Employment Verified w/in 10 Days	If Unemployed, on Job Search & Community Restitution 6 Days Per Week	Residence Verified w/in 72 Hours
Yes	4	0	2	2
No	0	1	0	1

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Total	4	1	2	3
% Compliant	100%	0%	100%	67%
N/A	0	3	2	1

Department Response: “The Department will do further training specifically with the current IPS officer concerning these requirements. The case file audit form will also be updated to include specific IPS requirements and regular case file reviews will reveal if requirements are not being met and they will be addressed with the officer. Any policies relating specifically to the IPS supervision program will be updated as needed as well.”

Required Action: Provide a copy of the staff training timeline and the case file audit form. Also, provide copies of revised policies.

Recommendation: None

Verification of Weekly Schedules

Pursuant to [A.R.S. § 13-914\(E\)\(4\)](#)

Findings:
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard: (101% and above) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%)) <input type="checkbox"/> Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below <input type="checkbox"/> Standard Not Applicable

The case record review consisted of four IPS case files and APETS documentation for the time period September, October, and November 2016. In order to be counted as completed for the month, schedules for all four weeks must be completed and contained in the case record. It should be noted, however, that not all schedules are detailed with times and locations of activities.

IPS Schedules Submitted			
4 Schedules Per Month	September 2016	October 2016	November 2016
Yes	0	0	2

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No	0	0	0
TOTAL	0	0	2
% Compliant	NA	NA	100%
N/A¹	4	4	2

¹NA refers to intensive probationers in jail, DOC, residential treatment, or recently transitioned to standard supervision.

Department Response: Not applicable

Required Action: None

Recommendation: None

IPS OST/FROST and Case Plan

Pursuant to [ACJA § 6-105.01\(E\)\(2\)\(b\)\(1\)\(a\)](#), [ACJA § 6-105.01\(E\)\(2\)\(b\)\(1\)\(g\)](#), [ACJA § 6-202.01\(L\)\(2\)\(h\)](#), [ACJA § 6-202.01\(L\)\(2\)\(c\)](#)

Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The case record review consisted of four IPS case files.

Requirement Met	Initial Assessment (OST) w/in 30 days or at PSI	Reassessment (FROST)¹ Every Six Months
Yes	1	1
No	0	0
Total	1	1

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% in Compliance	100%	100%
N/A	3	23

¹The FROSTs for the past three years were reviewed.

IPS Case Plans¹	Yes	No	Total	% in Compliance	NA²
Initial completed within 30 days	0	1	1	0%	3
Follow-up completed every 180 days	1	0	1	100%	19
Probation officer strategies to monitor compliance and accomplish the objectives	3	0	3	100%	1
Measurable strategies for the probationer and probation officer	1	2	3	33%	1
Required signatures obtained	3	0	3	100%	1

¹The case plans for the past three years were reviewed.

²Another agency/county responsible for initial case plan, and/or follow-up case plan, case plan not necessary for the applicable case and/or case plan not necessary at the time of the operational review or would have been verified in an earlier operational review.

Department Response: “The Department will do further training with officers on the timeframes and SMART case goal planning. Regular supervisor case file audits will ensure timeframes are being met, case plans are SMART, and officer’s continued monitoring of goal plans.”

Required Action: Provide a copy of officer training timeline and a copy of the case file audit form.

Recommendation: None

IPS Highest Criminogenic Need Areas Addressed on Case Plan

Pursuant to [ACJA § 6-202.01\(M\)\(2\)](#)

EBP requires that areas in the OST/FROST reflecting higher scores and/or higher need be addressed in the narrative of the case plan. If not addressed, an explanation should be provided in the case plan or Contacts/Case Notes screen in APETS/case record. This was reinforced in AOC case plan training sessions.

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Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☐ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

High Domain Scores on the Current OST/FROST Addressed in the Current Case Plan – 2 Case Plans Reviewed	
Yes	2
No	0
Total	2
% in Compliance	100%
N/A ¹	2

¹The 2 cases marked N/A did not have a score of 60 percent or above on the OST/FROST or did not have “high need.”

Department Response: Not applicable

Required Action: None

Recommendation: None

Incoming Interstate

Pursuant to [ACJA § 6-204.01\(J\)\(5\)\(a\)](#), [A.R.S § 31-467.06](#), [Interstate Commission for Adult Offender Supervision \(ICAOS\) Rule 4.106\(a\)](#), [ICAOS Rule 3.103 \(c\)](#) and [Rule 3.106 \(b\)](#)

Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above))
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

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The case record review consisted of five incoming ISC cases files and APETS documentation.

Summary of Incoming Interstate Compact Requirements	Yes	No	Total	% in Compliance	N/A
Were the Arizona Conditions Signed	5	0	5	100%	0
Is VCAF on Arizona Terms & Conditions	5	0	5	100%	0
Annual Progress Reports Completed	3	0	3	100%	2
Sending State's Terms & Conditions in File	5	0	5	100%	0
Interstate Tracking Screen Completed in APETS	5	0	5	100%	0
ISC Status Accurate in APETS (Accepted, Closed, etc.)	5	0	5	100%	0
Are VCAF Collections Current	0	5	5	NA	0
If VCAF collections are not current, has the PO addressed	5	0	5	100%	0
DNA Collected Within 30 Days	0	3	3	0%	2
OST Within 30 Days of Arrival or Acceptance	2	2	4	50%	1
ICP Within (60 days for SPS and 30 days for IPS) of Arrival or Acceptance	4	0	4	100%	1

Department Response: “The Department will review requirements with officers for meeting deadlines based on date of arrival on incoming ISC cases the same as other cases. The Department will ensure any policies regarding incoming ISC cases are updated and accurate.”

Required Action: Provide a copy of the officer training timeline along with copies of revised policies.

Recommendation: None

Outgoing Interstate

Pursuant to [ACJA § 6-204.01\(J\)\(5\)\(a\)](#)

Findings:
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard: (101% and above)) <input type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%)) <input checked="" type="checkbox"/> Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below <input type="checkbox"/> Standard Not Applicable

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The case record review consisted of 28 outgoing ISC cases files and APETS documentation.

Summary of Outgoing Interstate Compact Requirements	Yes	No	Total	% in Compliance	N/A
ISC status accurate (accepted, closed, etc.), ICOTS & APETS match	28	0	28	100%	0
Did probationer leave with valid reporting instructions	28	0	28	100%	0
Did the PO respond to violation reports within 10 business days	4	0	4	100%	24
Do the conditions in ICOTS match the conditions in the case file	28	0	28	100%	0
Was DNA sample secured from the probationer and transmitted to DPS within 30 days of being placed on probation or acceptance of incoming – <i>Per La Paz Policy, DNA must be secured within 72 hours of being placed on probation or acceptance of incoming</i>	22	5	27	81%	1
Was the Opted-in Victim notified of ISC and any other probation status issues	0	0	0	100%	28

Department Response: “The Department’s DNA policy stated that DNA shall be collected within 72 hours. This has been changed to within 30 days of sentencing or arrival from out of state for interstate compact cases. Training/reviewing of updated policy will take place and monthly case reviews will help ensure compliance. The revised DNA policy, S-27, has been approved by AOC APSD.”

Required Action: Provide a copy of officer training timeline along with a copy of the monthly case file review form.

Recommendation: None

For Information purposes only in relation to Court monies owed to Arizona:

Outgoing Interstate Compact Monies Owed	Yes	No	Total	%	N/A
Is money owed to Arizona	24	4	28	86%	0
Are payments current	5	19	24	21%	4

Department Response: “The review on outgoing ISC cases with monies owed reflects if monies were owed and the probationers compliance. It does not reflect if the officer addressed the delinquencies with

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the probationer. However, the Department has implemented a system of support staff running a financial statement for each outgoing ISC case every 60 days for the responsible officer to better monitor payments.”

Required Action: None

Recommendation: None

Closed

Pursuant to [A.R.S. §12-253 \(2\) and \(7\)](#), [A.R.S. §13-4415 \(A\)\(1-3\)](#), [A.R.S. §13-4415 \(B\)\(1-5\)](#), [A.R.S. §13-610\(C\), \(D\) and \(G through O\)](#), [A.R.S. §13-902\(C\)](#), [A.R.S. §13-805\(A\)\(1\)\(2\)](#), [ACJA §6-201.01\(J\)\(5\)\(a\)\(12\)](#)

Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The case record review consisted of 42 cases files and APETS documentation.

Closed Cases	Yes	No	Total	% in Compliance	NA
Warrant Check Before Termination	33	0	33	100%	9
Court Ordered Treatment Completed	8	6	14	57%	28
Restitution Owed at Closure	3	3	6	50%	36
Other financial terms owed at closure	30	11	41	73%	1
CRO Entered for Outstanding Financial Balances	29	1	30	97%	12
Opted-In Victim Notified of Closure	2	0	2	100%	40
CR hours required by Statute completed by Closure	6	2	8	75%	34
DNA collected/verified within 30 days	30	9	39	77%	3

Department Response: Regular supervisor case file reviews will monitor some of the above items.

Required Action: Provide a copy of the supervisor case file review form. The Department must implement a quality assurance process and administrative oversight to ensure compliance rates of 90 percent or above are met and sustained in all areas. Please provide a copy of the Department’s quality assurance process and administrative oversight to ensure continued compliance.

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Recommendation: None

TREATMENT SERVICES

SPS Treatment Referrals

Pursuant to [ACJA § 6-201.01\(J\)\(5\)\(b\)](#)

Findings:
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
<input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%)
<input type="checkbox"/> Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
<input type="checkbox"/> Standard Not Applicable

The case record review consisted of 37 SPS cases files and APETS documentation.

SPS Treatment Referral	
Requirement Met	Treatment Referral w/in 60 days
Yes	27
No	0
Total	27
% in Compliance	100%
N/A	10

Department Response: Not applicable

Required Action: None

Recommendation: None

IPS Treatment Referrals

Pursuant to [ACJA § 6-202.01\(L\)\(2\)\(o\)](#)

Findings:

- | |
|---|
| <input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard: (101% and above) |
| <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%)) |
| <input type="checkbox"/> Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below |
| <input type="checkbox"/> Standard Not Applicable |

The case record review consisted of four IPS cases files and APETS documentation.

IPS Treatment Referral	
Requirement Met	Treatment Referral w/in 60 days
Yes	4
No	0
Total	4
% in Compliance	100%
N/A	0

Department Response: Not applicable

Required Action: None

Recommendation: None

Transferred Youth

A transferred youth (TY) is an offender who committed an offense while a juvenile and was:

- a. Transferred to the adult court via a transfer hearing or
- b. Charged in the adult court (direct filed) while still a juvenile.

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There are no ACJA codes or directives regarding TY. However, the AOC and the probation departments are working on developing guidelines for supervision of youthful offenders (based on evidence-based practices) to assist the departments in addressing the needs of this population.

Statutes relating to TY are listed below: [A.R.S. § 8-322](#), [A.R.S. § 8-327](#), [A.R.S. § 13-501](#), [A.R.S. § 13-504](#), [A.R.S. § 13-921](#), [A.R.S. § 13-923](#), [A.R.S. § 13-3821](#), [A.R.S. § 13-3822](#), [A.R.S. § 8-302](#), [A.R.S. § 13-350.01](#)

Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☐ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☒ Standard Not Applicable

At the time of the review the department reported not having a transferred youth population on probation.

SPS Drug Testing

Pursuant to [ACJA § 6-201.01 \(J\)\(1\)\(f\)](#)

Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above))
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The case record review consisted of 37 SPS cases files and APETS documentation.

SPS Drug Testing		
Requirement Met	Drug Testing Frequency Described in Case Plan/Record ¹	Drug Tested as Described in Case Plan/Record
Yes	9	9

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No	3	0
Total	12	9
% in Compliance	75%	100%
N/A	25	28

¹Case plans were considered as needing to describe drug testing frequency if the drug domain was 67 or 100 percent and/or if drug testing was described in case plan/record regardless of drug domain score.

Department Response: “Regular supervisor case file reviews will monitor thoroughness of case plans and that they are SMART addressing necessary areas of risk based on the OST/FROST. The Department will consider having officers attend an OST/FROST refresher training if available. The Department will also review urinalysis testing best practices with staff.”

Required Action: Provide a copy of the supervisor case file audit form and a timeline for officer training.

Recommendation: None

IPS Drug Testing

Pursuant to [ACJA § 6-202.01\(L\)\(2\)\(e\)](#)

Findings:
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard: (101% and above) <input type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%)) <input checked="" type="checkbox"/> Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below <input type="checkbox"/> Standard Not Applicable

The case record review consisted of four IPS cases files and APETS documentation.

IPS Drug Testing		
Requirement Met	Drug Testing Frequency Described in Case Plan/Record¹	Drug Tested as Described in Case Plan/Record
Yes	3	3
No	1	0

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Total	4	3
% in Compliance	75%	100%
N/A	0	1

¹Case plans were considered as needing to describe drug testing frequency if the drug domain was 67 or 100 percent and/or if drug testing was described in case plan regardless of drug domain score.

Department Response: “Regular supervisor case file reviews will monitor thoroughness of case plans and that they are SMART addressing necessary areas of risk based on the OST/FROST. The Department will consider having officers attend an OST/FROST refresher training if available. The Department will also review urinalysis testing best practices with staff.”

Required Action: Provide a copy of the supervisor case file review form and a timeline for officer training.

Recommendation: None

Drug Treatment and Education Fund (DTEF)

Pursuant to [A.R.S. § 13-901.01](#), [A.R.S. § 13-901.02](#), [ACJA § 6-205\(G\)\(1\)c](#)

Pursuant to the Statewide APETS Policy Minimum Use Mandates, “In order to ensure statewide consistency, all client information will be recorded and maintained in the APETS system. In addition, all counties are expected to use and complete all fields in APETS as the information is applicable and becomes available.”

Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The following information regarding the department’s management of DTEF cases was gathered from the Self-Assessment Questionnaire and APETS.

According to APETS data, 3 cases were pulled that were considered to be DTEF cases.

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Cases Funded by DTEF				
13-901.01 (A)	0			
13-901.01 (F)	0			
13-901.01 (D)	0			
	Yes	No	N/A	% In Compliance
Screened for AHCCCS¹	0	0	0	NA
Evaluation completed (instrument approved by AOC)	0	0	0	NA
Ability to pay form completed and in file	0	0	0	NA
Did mandatory A' and F's receive a referral for treatment/education	0	0	0	NA
If OST/FROST Score was a minimum of 67% in drug domain was there a referral to treatment/education	0	0	0	NA
AHCCCS Results	Eligible	Ineligible	N/A	DTEF Funded when AHCCCS Eligible
If yes, "eligible" or "ineligible" or "n/a"	0	0	3	0

¹Reference: APSD's Client Services DTEF User Manual Version 2014-01 dated 3/24/2014

All cases reviewed were **not funded** by DTEF and results are in the table below.

Cases Not Funded by DTEF				
13-901.01 (A)	2			
13-901.01 (F)	0			
13-901.01 (D)	1			
	Yes	No	NA¹	% in Compliance
Did mandatory A' and F's receive a referral for treatment/education	1	1	1	50%
If OST/FROST Score was a minimum of 67% in drug domain was there a referral to treatment/education	0	0	3	NA

¹cases that scored less than 67% in the drug domain

Department Response: "Policy has been updated to reflect that referrals for mandatory treatment will occur at initial intake following the ability to pay matrix being completed with the client. The department recently implemented an Ability to Pay Matrix and has done internal training. The department has also appointed a DTEF Coordinator to ensure 13-901.01 cases are being handled appropriately and all pertinent/necessary information is entered in APETS. Monthly case reviews will ensure compliance with the new policy."

"The Department is implementing a process and has assigned a DTEF Coordinator to better track these cases and to ensure all requirements with this demographic are being met."

Required Action: None

Recommendation: None

ACKNOWLEDGEMENTS

The Adult Probation Services Division (APSD) of the Administrative Office of the Courts (AOC) appreciated the hospitality, collaboration, and patience of the La Paz County Adult Probation staff during the operational review process.

The department submitted a thorough and complete Self-Assessment Questionnaire (SAQ), responded to all questions/requests for additional information, was open and responsive throughout the process and reviewed sections of this report as they were completed during the pre-draft phase.

Because of preliminary feedback, the department began corrective actions in some areas prior to the publication of this report. This confirms the department's dedication to constant improvement in the delivery of probation services to La Paz County.

The operational review team appreciates the professionalism and cooperation demonstrated by your department throughout the review process. We look forward to your continued efforts and response to the Draft Report within 30 days of receipt.

COMPLIANCE SUMMARY COMPARISON		
ADMINISTRATION AND MANAGEMENT		
	2017	2012
Employment		
Application for Employment Completed	100%	100%
Verification of Bachelor's Degree	100%	100%
Criminal History Check	100%	80%
Arizona & Other States of Residence MVD Check	100%	100%
Employer Reference Checks	0%	60%
Professional Reference Checks	100%	NA
Personal Reference Checks	50%	40%
Officer Certification/COJET/Training Requirements		
Completion of PO Certification Academy	100%	100%
Certification Requested by CPO within 1 Year of Hire Date	NA	NA
Completion of IPS Academy within 1 Year of Hire Date	100%	100%
OST/FROST Refresher Training Every 3 Years	0%	NA
Annual COJET	100%	100%
8 Hours of Officer Safety Training within 30 Days of Appointment	0%	NA
8 Hours of Defensive Tactics Refresher Training Annually	100%	100%
Firearms Annual Training	100%	100%
CPO Training Every 3 Years	NA	NA
Biannual Criminal History & MVD Check		
Criminal History Check Every 2 Years	0%	0%
MVD Check Every 2 Years	0%	0%
Pre-sentence Reports on Time	98%	100%

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COMMUNITY PROTECTION		
SPS Supervision Contacts		
Minimum Level	100%	100%
Medium Level	97%	63%
Maximum Level	17%	50%
IPS Supervision Contacts		
Contacts with Probationers	70%	0%
Contact with Employers	0%	0%
Sex Offender Requirements		
Registration within 10 Days	75%	71%
Verify residence within 30 days (SPS), 72 hours (IPS)	57%	NA
Address/Name Change Notification Change within 72 hours	0%	67%
Yearly Identification	50%	83%
DNA within 30 Days	100%	43%
Annual Polygraphs	100%	0%
Referred to Treatment	75%	0%
GPS Compliance		
GPS attribute marked in APETS	NA	100%
Probationer activated on initial report	NA	0%
GPS rules signed by probationer	NA	0%
PO initiate immediate response	NA	100%
Was response appropriate	NA	100%
PO respond to alerts within 24 hours	NA	100%
Responses entered into APETS within 72 hours	NA	100%
If absconder, PTR with 72 hours	NA	NA
Signed Review/Acknowledgement of Terms of Conditions		
SPS	81%	0%
IPS	100%	0%
DNA Collection		
SPS	61%	88%
IPS	100%	83%
Activity to Locate Before Warrant Issued		
IPS - Warrant Requested within 72 Hours	NA	NA
SPS - Warrant Requested within 3 Months	80%	50%
Residence Checked	50%	29%
Collaterals Checked	55%	19%
Employment Checked	0%	17%
Certified Letter Sent	10%	25%
Activity of Locate After Warrant Issued		
Residence Checked	0%	0%
Employment Checked	0%	0%
Opted-In Victim Notified	100%	100%
Annual Records Check	63%	0%
If warrant after 7/20/2011, CRO Filed within 90 days	20%	0%
Whereabouts Determined	NA	16%

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VICTIMS' RIGHTS		
SPS		
Pre-sentence Contact	100%	86%
Notice of Changes Given	100%	50%
IPS		
Pre-sentence Contact	100%	100%
Notice of Changes Given	NA	0%
OFFENDER ACCOUNTABILITY		
SPS Financials		
Victim Notified if Restitution Two Months in Arrears	100%	100%
Court- Notification if Restitution Two Months in Arrears	40%	50%
Probation Supervision Fees (PSF) Current	8%	0%
Officers Addressed Financial Delinquencies	90%	68%
¹ (includes PSF and restitution delinquencies)		
IPS Financials		
Court Notified if Restitution Two Months in Arrears	NA	NA
Victim Notified if Restitution Two Months in Arrears	NA	NA
Restitution Current	NA	NA
Probation Supervision Fees (PSF) Current	0%	0%
Collection of IPS Probationer Wages	0%	NA
Officers Addressed Financial Delinquencies	100%	0%
¹ (includes PSF and restitution delinquencies)		
SPS CR Hours		
Average Completed – 3-month review period	0%	21%
Officers Addressed Delinquent Hours	0%	33%
IPS CR Hours		
Average Completed – 3-month review period	100%	0%
Officers Addressed Delinquent Hours	NA	0%
CASE MANAGEMENT		
SPS Cases		
Residence Verification within 30 days of Sentencing/Release from Custody	56%	28%
Initial Employment Verification	76%	NA
OST Completed within 30 Days	81%	97%
FROST Completed 180 Days	52%	21%
Supervision Level Matches Assessment Scores	79%	85%
Initial Case Plan Completed within 60 Days	76%	17%
Case Plan Completed at 180 Days	37%	14%
PO Strategies for the Probationer and PO	81%	NA
Measurable Strategies for the Probationer and PO	52%	NA
Completed Case Plan for Minimum Supervision Level if Necessary	80%	NA
OST/FROST Highest Criminogenic Need Addressed in Case Plan	100%	NA
Case Plan Signatures	85%	68%
IPS Cases		
Photo in File	100%	100%
Verification of Employment within 10 Days	0%	50%
Unemployed & 6 days/week Job Search & CR	100%	NA
Verification of Residence within 72 Hours	67%	20%
Collection of Weekly Schedules	100%	0%
Initial Assessment (OST) within 30 Days or at PSI	100%	100%

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Reassessment (FROST) Every 180 Days	100%	13%
Initial Case Plan	0%	67%
Case Plan Every 180 Days	100%	25%
PO Strategies for the Probationer and PO	100%	NA
Measurable Strategies for the Probationer and PO	33%	NA
Case Plan Signatures	100%	67%
OST/FROST Highest Criminogenic Need Addressed on Case Plan	100%	33%
Incoming ISC Cases		
Were the Arizona Conditions Signed	100%	100%
Is VCAF on Arizona Terms & Conditions	100%	67%
DNA Collected Within 30 Days	100%	NA
OST Within 30 Days of Arrival or Acceptance	50%	NA
Initial Case Plan Within 60 days of Arrival or Acceptance	100%	NA
Annual Progress Reports Completed	100%	75%
Sending State's Terms & Conditions in File	100%	57%
Interstate Tracking Screen Completed in APETS	100%	86%
ISC Status Accurate in APETS (Accepted, Closed, etc.)	100%	NA
Are VCAF Collections Current	0%	NA
If VCAF Collections Are Not Current, Has PO Addressed	100%	NA
Outgoing ISC Cases		
ISC Status Accurate (Accepted, Closed, etc.)	100%	NA
Did probationer leave with valid reporting instructions	100%	95%
Did the PO respond to violation reports within 10 business days	100%	NA
DNA collected prior to departing AZ	81%	75%
Was the Victim notified of ISC and any other probation status issues	100%	100%
Is Money Still Owed to Arizona	86%	90%
Are Payments Current	21%	33%
Closed Cases		
Warrant Check Before Termination	100%	7%
DNA collected/verified within 30 days	77%	89%
Court Ordered Treatment Completed	57%	69%
CR Completed by Closure	75%	50%
Opted-In Victim Notified of Closure	100%	100%
If Restitution Owed at Closure, Extended for Restitution	NA	NA
Other Financial Terms Owed at Closure	73%	63%
CRO Entered for Outstanding Financial Balances	97%	78%

TREATMENT SERVICES

SPS Cases		
Treatment Referral within 60 Days	100%	50%
IPS Cases		
Treatment Referral within 60 Days	100%	100%
Transferred Youth Cases		
Attended treatment	NA	NA
Completed treatment	NA	NA
Is treatment reflective of best practices	NA	NA
IPS Level change based on compliance	NA	NA
Probationer has GED/high school diploma	NA	NA
Enrolled in GED classes	NA	NA
Enrolled in school	NA	NA
Employed	NA	NA

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SPS Drug Testing

Frequency Described in Case Plan	75%	43%
Drug Tested as Described in Case Plan	100%	83%

IPS Drug Testing

Frequency Described in Case Plan	75%	0%
Drug Tested as Described in Case Plan	100%	0%

DTEF Funded Cases

Screened for AHCCCS	NA	11%
Client Services Screen in APETS Completed	100%	69%
Evaluation Completed (Instrument Approved by AOC)	NA	NA
Ability to Pay Form Completed and in File	NA	69%